Name in Full Bowers.

Certificate of Death

Died at Town Still Pond. County Kent — MARYLAND

Date 1899 Month 5 Day 1 | Age Y. 1 M. D. | Native of Md. | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

Father's Name Joseph Bowers. Mother's Name Elizabeth.

Cause of Death: Primary Uraemia. 100 How long sick 1 day.

Immediate

~~Accident, Suicide, Homicide~~

Reported by W. S. Maxwell

Address Still Pond, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Eugene Bowser

Died at Chestertown (Town) Kent (County) MARYLAND

Date 1899 Month May Day 22 Age Y. 23 M. D. Native of Md. Occupation Farm hand

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of — Wife —

Father's Name Robert Bowser Mother's Name Martha Bowser

Cause of Death: Primary —

Immediate Pneumonia J. 72

How long sick 8 days

~~Accident, Suicide, Homicide~~

Reported by G. W. Simmons

Address Chestertown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968

Name in Full: Stellia Bradly — Certificate of Death

Died at: Town: Stull Pond — County: Kent — MARYLAND

Date 1899: Month: ~~May~~ — Day: 20 — Age: Y. 13 M. 8 D. — Native of: Md — Occupation: Student

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / Single — ~~Widow~~ / ~~Widower~~ — Divorced / ~~Number of children living~~

~~Husband~~ / Wife ~~of~~

Father's Name: Tom Bradly — Mother's Name: 5-7 Gertie Jewel

Cause of Death — Primary: Gastritis Act. — How long sick

Immediate: Valvular Mit. Heart — Accident, Suicide, Homicide

Reported by: Jos. W. Uzie.

Address: Stull Pond Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85988

Name in Full — Certificate of Death

Wm. H. Buckmaster

Died at Town: Chestertown — County: Kent — MARYLAND

Date 189 9 — Month: May — Day: 18 — Age: Y. 68 M. – D. – — Native of: Md. — Occupation: Farmer

Male / ~~Female~~ — White / ~~Colored~~ — ~~Married~~ / Single — ~~Widow~~ / Widower — ~~Divorced~~ — Number of children living: none

Husband / ~~Wife~~ of: Mrs. Margaret A. Brown (Married)

Father's Name: — — Mother's Name: Burton

5-2

Cause of Death — Primary: Disease on Brain — How long sick: 3 months

Immediate: Senile Paralysis — ~~Accident, Suicide, Homicide~~

Reported by: Jos. H. Caitlin

Address: Chestertown Kent Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66968

Name in Full

Certificate of Death

Alice. Butler.

Died at Town Sassafras County Kent MARYLAND

Date 1899 Month May Day 8 | Age Y. 8 M. D. | Native of Md | Occupation

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced.~~ ~~Number of children living~~

~~Husband~~ Wife of

Father's Name John. Butler. Mother's Name Jane Munson

Cause of Death: Primary Phthisis - pulmonary 22a — How long sick 4 months

Immediate — ~~Accident, Suicide, Homicide~~

Reported by M M Jones.

Address Sassafras Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65988

Name In Full Mrs. Mary Fields

Certificate of Death

Died at Town near Betterton County Kent MARYLAND

Date 189 9 Month 5 Day 6 | Age Y. 54 M. D. | Native of Md. | Occupation

~~Male~~ / Female | White / ~~Colored~~ | Married / ~~Single~~ | Widow / Widower | Divorced | Number of children living

~~Husband~~ / Wife of Wm. H. Fields

Father's Name | Mother's Name 97

Cause of Death: Primary Bright's disease — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Dr Wm. S. Maynard

Address Still Pond, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79845

Name in Full

George Frisby

Certificate of Death

Died at Town: Coleman County: Kent Co MARYLAND

Date 1899 Month: May Day: 15 | Age Y.: 19 M.: - D.: - | Native of: Md. | Occupation: —

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children ~~living~~

Husband / Wife of —

Father's Name: Chas Frisby

Mother's Name: Emma Frisby

Cause of Death — Primary: Consumption 22a — Immediate:

How long sick: 18 months

Accident, Suicide, Homicide

Reported by: Mrs H Krusen Undertaker

Address: Still Pond Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Attended by several Doctors
at different Times.

Information Recd from Parents
of Child.

Name in Full Elmore Groome — Certificate of Death

Died at Town Hanesville County Kent Co. MARYLAND

Date 1899 Month May Day 1 | Age Y. 28 M. D. | Native of Kent Co. | Occupation Domestic

Male — White — Married — Widow — Divorced —

Female — Colored — Single — Widower — Number of children living none

Husband / Wife of Wm. Groome

Father's Name Benj. Whidbee — Mother's Name Caroline Whidbee

Cause of Death: Primary — How long sick 8 years.

Immediate Consumption

Accident, Suicide, Homicide

Reported by John M. Dodd Undertaker.

Address Chestertown Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

84 Dr. J. H. Hussey, Hanesville Md.

9-17

Did not attend here

Name in Full | Certificate of Death

Katia Mench

Died at Town: Smithville County: Kent Co MARYLAND

Date 1899 Month: May Day: 5 | Age Y. M. D.: 8 | Native of: Kent Co Md | Occupation: none

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living: 0

~~Husband~~ ~~Wife~~ of

Father's Name: Charles Mench | Mother's Name: Katia Mench

Cause of Death: Primary 82 | How long sick: 2 months

Immediate: Cholera Infantum | ~~Accident, Suicide, Homicide~~

Reported by: John H. Hessey Md

Address: Hanesville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Richard Lloyd Nicols

Certificate of Death

Died ~~at~~ Near Town Rock Hall County Kent MARYLAND

Date 1899 Month May Day 23rd Age Y. 80 M. D. Native of Kent Co. Md. Occupation None

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 3

Husband / Wife of Ellen Nicols

Father's Name Jermiah Nicols Mother's Name Elizabeth Nicols

Cause of Death: Primary Hemiplegia — How long sick 2 Weeks

Immediate 42 — ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by L. B. Willson

Address Edesville Kent Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Anna C Racin

Certificate of Death

Died at Town: Millington County: Kent Co MARYLAND

Date 1897 Month: May Day: 3 | Age Y.: 75 M.: D.: | Native of: Maryland | Occupation:

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | Widow ~~Widower~~ | Divorced

Number of children living 3

~~Husband~~ Wife ~~of~~ Dr E F Racin

Father's Name: Saml Cacy

Mother's Name: Elizabeth Cacy

Cause of Death: Primary: Pneumonia 72 | How long sick: 10 days

Immediate

Accident, Suicide, Homicide

Reported by Dr Clarke,

Address Millington Md,

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Lucy Taylor

Certificate of Death

Died at Town Smithville County Kent MARYLAND

Date 1899 Month May Day 15 Age Y. 33 M. D. Native of Kent Co Md Occupation Housewife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 1

~~Husband~~ Wife of Aaron Taylor

Father's Name Charles Joiner Mother's Name Augusta Joiner

Cause of Death Primary Confinement 117 How long sick 24 hours

Immediate Internal Hemorrhage ~~Accident, Suicide, Homicide~~

Reported by John H Hessey M.D.

Address Hanesville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Isac White

Certificate of Death

Died at Town Chestertown County Kent MARYLAND

Date 1899 Month May Day 30 | Age Y. 78 M. — D. | Native of Del | Occupation Laborer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 5

Husband / Wife of Elizabeth White

Father's Name —

Mother's Name —

Cause of Death: Primary Pulmonary Tuberculosis 220 — How long sick 3 years

Immediate Exhaustion — ~~Accident, Suicide, Homicide~~

Reported by Dr. J. A. Leatherbury

Address Chestertown Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968